

TRANSMITTAL FORM

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent & Trademark Office via electronic filing (EFS) on the date shown at the bottom of this form. Signature: <u>/ Debbie Allen /</u> Printed Name: Debbie Allen			First Named Inventor: Philip D. Nguyen		Docket Number: 2003-IP-010380U1			
			Application Number: 10/691,319		Art Unit: 1715		Conf. Number: 5926	
			Filing Date: October 22, 2003		Examiner: Elena Tsoy Lightfoot			
			Title: Methods for Reducing Particulate Density and Methods of Using Reduced-Density Particulates					
			ENCLOSURES (Check all that apply)					
<input type="checkbox"/> Fee Transmittal		<input type="checkbox"/> Drawings		<input type="checkbox"/> After Allowance Communication to Technology Center				
<input type="checkbox"/> Fee Attached		<input type="checkbox"/> Licensing-Related Papers		<input checked="" type="checkbox"/> Appeal Communication Reply Brief				
<input type="checkbox"/> Amendment / Reply		<input type="checkbox"/> Petition		<input type="checkbox"/> Proprietary Information				
<input type="checkbox"/> After Final		<input type="checkbox"/> Petition to Convert Provisional Application		<input type="checkbox"/> Status Letter				
<input type="checkbox"/> Affidavit / Declaration		<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address		<input type="checkbox"/> Other Enclosure(s) (identified below):				
<input type="checkbox"/> Extension of Time Request		<input type="checkbox"/> Terminal Disclaimer						
<input type="checkbox"/> Express Abandonment		<input type="checkbox"/> Request for Refund						
<input type="checkbox"/> Information Disclosure Stmt.		<input type="checkbox"/> CD, No. of CD's 0						
<input type="checkbox"/> Certified Priority Documents		<input type="checkbox"/> Landscape Table on CD						
<input type="checkbox"/> Reply to Missing Parts		Remarks:						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
I am the <input type="checkbox"/> applicant / inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed <input checked="" type="checkbox"/> attorney or agent of record or acting under 37 CFR 1.34. Registration Number: <u>53,086</u>				Signature <u>/Iona N. Kaiser/</u> Printed Name Iona N. Kaiser Telephone Number 713-653-1724 Date March 30, 2011				